This Form is for INTERNAL PTO USE ONLY It does NOT get mailed to the applicant.

NOTICE OF FILING / CLAIM FEE(S) DUE (CALCULATION SHEET)

. ·	(Alarall Ma
APPLICATION NUMBER:	Clece1481

Total Fee Calculation

	Fee Code	Total # Claims	Number Extra	X	Fee	Fee = Total
•	Sm./Lg.				Sm. Entity	Lg. Entity
Basic Filing Fee	201/101	. 7			345	<u>690</u> - <u>600</u>
Total Claims >20	203/103	-20 =		x	70	18 -
Independent Claims >3	202/102	-3=		x	100	<u> 18</u> =
Mult. Dep Claim Present	204/104				130	260 =
Surcharge	205/105				<u>65</u>	130 - (3)
English Translation	139					
TOTAL FEE CALCULA	ATION					gro.
Fees due upon filing t	the application:	:				
Total Filing Fees Due	e = . \$	Ţ.	no	<u>, </u>		
Less Filing Fees Subr	nitted -\$		0			
BALANCE DUE	= \$		YN			
Athas.						
Office of Initial Paten	t Examination	-				